MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
Substitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number: 10/664,658

Filing Date:

Applicant(s):

*May be used for additional claims or amendments

CLAIMS	AS FILED 3-9-06 Indep	AS FILED Depend	AFTER FIRST AMENDMENT Indep	AFTER FIRST AMENDMENT Depend	AFTER SECOND AMENDMENT Indep	AFTER SECOND AMENDMENT Depend		CLAIMS	Indep	Depend	Indep	Depend	Indep	Depend
1	1							51						
2		1						52						
3		1						53						
4		1						54						
5		1						55						
6	1							56						
7		1						57						
8								58						
9	1							59						
10		1						60						
11		1						61						
12		1						62						
13		1						63						
14								64						
15	1							65						
16		1						66						
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18		1						68						
19		1						69						
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44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
Total Indep	7							Total Indep						
Total Depend		18						Total Depend						
Total Claims	25							Total Claims						